



HIV/AIDS HEALTH PROFILE

HIV and AIDS Estimates	
Total Population*	80 million (mid-2007)
Estimated Population Living with HIV/AIDS**	5,300 [2,900-13,000] (end 2005)
Adult HIV Prevalence**	<0.1% [<0.2%] (end 2005)
HIV Prevalence in Most-At-Risk Populations***	MSM: 6.2% (Alexandria) (end 2007)
Percentage of HIV-Infected People Receiving Antiretroviral Therapy***	22% (end 2006)

*US Census Bureau **UNAIDS ***WHO/UNAIDS/UNICEF Towards Universal Access, April 2007.
***MOHP, 2007. Bio-BSS.

official report issued in January 2008. Injecting drug use accounted for 2.9 percent of HIV infections and mother-to-child transmission for 1.6 percent; 5.2 percent are from "unknown" causes. Males are four times more likely to have HIV than females, but this may be due to more men being tested than women. Other people likely to be exposed to HIV in Egypt include street children, prisoners, and refugees. Results of the United States Agency for International Development (USAID)-funded Biological-Behavioral Surveillance Survey, conducted by the Ministry of Health and Population (MOHP), were disseminated in December 2006. The survey targeted street children, female sex workers (FSWs), men who have sex with men (MSM), and injecting drug users (IDUs) and identified a concentrated epidemic among MSM in Alexandria, with a sero-prevalence of 6.2 percent.

Egypt still faces several challenges in maintaining low prevalence of HIV/AIDS. There is a general reluctance on the part of the government and civil society to discuss issues related to marginalized groups such as MSM, FSWs, and IDUs. Egypt also receives millions of tourists and refugees from countries with high HIV prevalence and/or illicit drug use rates. In addition, there are pervasive fears and stigmatization of HIV/AIDS and a lack of effective STI/HIV/AIDS education programs and other preventive measures, such as peer education and outreach and behavior change communications among at-risk groups.

With an estimated tuberculosis (TB) incidence of 11 new cases per 100,000 people, Egypt has relatively low levels of TB according to 2005 data from the World Health Organization. Currently, less than 1 percent of adult TB patients are HIV-positive. However, continued monitoring is necessary because an increase in the incidence of HIV-TB co-infection could add to the complexity of fighting both diseases in Egypt.

National Response

NAP, established within the MOHP in 1986, is the official governmental body responsible for HIV/AIDS prevention. The National Strategic Plan (2006–2010) builds on the successes of the previous five-year plan and is designed to maintain the low prevalence of HIV/AIDS and improve health care services for those infected or affected by the disease. The Plan's objectives are:

- Strengthen HIV/AIDS surveillance;
- Build capacity for an expanded HIV/AIDS response;
- Increase HIV/AIDS awareness;
- Develop outreach and peer education programs for vulnerable groups;
- Expand voluntary counseling and testing (VCT) services; and
- Improve quality of life for HIV/AIDS-infected and -affected populations.

With less than 1 percent of the population estimated to be HIV-positive, Egypt is a low-HIV-prevalence country. Unsafe behaviors among most-at-risk populations and limited condom use among the general population place Egypt at risk of a broader epidemic. According to the National AIDS Program (NAP), there were 1,155 people living with HIV/AIDS (PLWHA) in Egypt by the end of 2007. UNAIDS estimates for 2005 were higher, putting the number of HIV-positive Egyptians at 5,300.

Egypt reported its first case of HIV/AIDS in 1986. Among officially reported cases, heterosexual intercourse was the primary mode of transmission (49.1 percent), followed by homosexual intercourse (22.9 percent), renal dialysis (12 percent), and blood transfusion (6.2 percent), according to the NAP in an



Since 2005, the Government of Egypt has become more actively involved in the fight against HIV/AIDS. The government integrated HIV/AIDS into preparatory and secondary school curriculums; established nine mobile (VCT) centers and 14 fixed centers around the country; conducted trainings for physicians and nurses on clinical management and nursing care; and started to provide antiretroviral therapy (ART) for HIV/AIDS patients free of charge. By the end of 2006, according to UNAIDS, 22 percent of HIV-infected women and men were receiving ART.

In 2006, Cairo was the site of a three-day, UNAIDS-supported workshop on HIV/AIDS and drug use in the region. The workshop included representatives of governments, nongovernmental organizations (NGOs), and research programs from the Arab countries as well as from Afghanistan, Iran, and Pakistan. The Government of Egypt worked with UNICEF to prevent HIV/AIDS among youth and worked with the United Nations Office on Drugs and Crime to address HIV/AIDS among IDUs.

Egypt is negotiating a sixth-round grant with the Global Fund to Fight AIDS, Tuberculosis and Malaria to fight the spread of HIV/AIDS. The U.S. Government provides one-third of the Global Fund's contributions.

USAID Support

Through the U.S. Agency for International Development (USAID), Egypt in fiscal year 2007 received \$1.48 million for essential HIV/AIDS programs and services. USAID programs in Egypt are implemented in partnership with the U.S. President's Emergency Plan for AIDS Relief (PEPFAR). The Emergency Plan is the largest commitment ever by any nation for an international health initiative dedicated to a single disease. To date, the U.S. has committed \$18.8 billion to the fight against the global HIV/AIDS pandemic, exceeding its original commitment of \$15 billion over five years.

Reauthorized on July 30, 2008, the U.S. is continuing its commitment to global AIDS in the amount of \$39 billion for HIV/AIDS bilateral programs and contributions to the Global Fund to Fight AIDS, Tuberculosis and Malaria. Working in partnership with host nations, the initiative will support antiretroviral treatment for at least 3 million people, prevention of 12 million new HIV infections, and care and support for 12 million people, including 5 million orphans and vulnerable children.

Since 1999, USAID/Egypt provided technical assistance and funding to NAP and associated NGOs in the fight against HIV/AIDS. USAID efforts focus on conducting surveillance and prevention in most-at-risk populations, educating health providers about diagnosis and treatment, and increasing awareness in the general population. The Agency supported VCT centers, behavior change and prevention messages, and blood safety practices.

In July 2003, USAID and NAP launched the three-year Freedom Program to prevent the spread of HIV/AIDS among IDUs. The program provided street-based and drop-in counseling, risk reduction and peer education, and in some cases, medical and nutritional support. It reached more than 900 IDUs on the streets, and more than 600 users visited the Freedom Program outreach center in Shoubra, Cairo.

In collaboration with the MOHP, USAID launched a comprehensive prevention program for sexually transmitted infections (STIs), including HIV/AIDS. The program created national guidelines, service provider training manuals, and a reference chart for STI management. It also established education programs, VCT services, and a confidential hotline. As part of this program, 25 doctors from Cairo and Alexandria attended "train-the-trainer" courses for STI management. The program also established pilot clinics, designed to offer improved STI services, the first of which was inaugurated in June 2006 in Cairo.

Current USAID support to the MOHP/NAP includes assistance to address the MSM concentrated epidemic in Alexandria and a grant to UNICEF to build the knowledge and skills of street children to deal with various HIV/AIDS-related risks and to provide access to care and support services.

Important Links and Contacts

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USAID HIV/AIDS Web site, Egypt: http://www.usaid.gov/our_work/global_health/aids/Countries/ane/egypt.html

For more information, see USAID HIV/AIDS Web site http://www.usaid.gov/our_work/global_health/aids/

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